Applica	tion o	r Docket	Number
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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I						SMALL ENTITY		OTHER THAN		THAN			
		(Column 1) (Column 2)		TYI	TYPE				SMALL ENTITY				
TOTAL CLAIMS						F	RATE	FEE		RATE	FEE		
FOR			NUMBER I	NUMBER FILED		NUMBER EXTRA		SIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	56 min	nus 20= * 3b			\ \ \ \ \ \ \ \	K\$ 9=		OR	X\$18=	648	
INDEPENDENT CLAIMS /C minus 3 =					* 7		\[\bar{\}\]	X40=		OR	X80=	56 O	
MULTIPLE DEPENDENT CLAIM PRESENT							 -	-135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						T	OTAL		OR	TOTAL	1918		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
A)		(Column 1)		(Colu	mn 2)	(Column 3)	S	MALL E	ENTITY	OR	SMALLE		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	1BER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOM	Total	. 56	Minus	** 6	56	=	_ \	(\$ 9=		OR	X\$18=		
AME	Independent	* 3	Minus	PENDENT	I CLAIM	-		X40=	-	OR	X80=		
لــا	rinoi PRESE	NATION OF MU	OLITE DE	FINDEN	LOLAIM		+	135=		OR	+270=		
								TOTAL		OR	TOTAL		
		(Column 4)		(Cale	mn Ol	(Column 0)	ADL	OIT. FEE		1-''	ADDIT. FEE		
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	· —		ADDI			ADD!	
ENT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=	\	(\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T CL AIR4	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+	135=		OR	+270=		
•							ADD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
L		(Column 1)		_	mn 2)	(Column 3)	ř.						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOW	Total	•	Minus	**		=	X	(\$ 9=		OR	X\$18=		
IME	Independent	•	Minus	***		=	1 x	<40=		1	X80=	 	
Ľ	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDEN.	T CLAIM		۱ ۲			OR		 	
• 1	f the entry in colum	nn 1 is lose than "	ne entry in col-	ımn 2 mair	e "O" in col	umn 3	+	135=		OR	+270=		
***	If the "Highest Nur If the "Highest Nu	mber Previously Pa mber Previously Pa	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

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